CLAIMS ONLY

Application Number	Filing Date
10751319	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3		1				
4		1				
5	1					
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50						
Total Indep	2					
Total Depend	5					
Total Claims	7					

CLAIMS		Indep	Depend	Indep	Depend	Indep	Depend
51							
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99							
100							
Total Indep							
Total Depend							
Total Claims							